

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/140,049	08/26/98	052	3621	COTE/971/US

APPLICANT

ARMAND COTE, LEICESTER, MA.

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED

*Provisional application No. 60/056,431 Filed 8/25/1997*

B.G.

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

B.G. none

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

B.G. none

FOREIGN FILING LICENSE GRANTED 09/15/98

\*\*\*\*\* SMALL ENTITY \*\*\*\*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MA	5	14	2
Examiner's Initials <u>B.G.</u>		Initials _____			

ADDRESS	<del>NIELDS LEMACK &amp; DINOMAN</del> <del>176 EAST MAIN STREET</del> <del>3011E 8</del> <del>WESTBOROUGH MA 01581</del> <b>Mirick, O'Connell, DeMallie + Langee, LLP</b> <b>1700 West Park Drive</b> <b>Westborough, MA 01581-3941</b>
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TITLE	BREAKAWAY UTILITY POLE
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FILING FEE RECEIVED	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
\$395	No. _____ to charge/credit DEPOSIT ACCOUNT	
	NO. _____ for the following:	